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I hereby r 37 CFR 3		evious powers of attorney of	given in the a	pplication identified	in the att	tached staten	nent under
i hereby a							
✓ Practitioners associated with the Customer Number:			75671				
OR OR							
Pract	titioner(s) name	ed below (if more than ten patent p	practitioners are	to be named, then a cust	omer numi	ber must be use	d):
	Name		Registration Number				Registration Number
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as attorney	(s) or agent(s)	to represent the undersigned before	re the United St	tates Patent and Tradema	ark Office (	USPTO) in conf	ection with
any and all	patent applicat	ions assigned only to the undersign	gned according	to the USPTO assignmen	t records o	or assignment do	cuments
attached to this form in accordance with 37 CFR 3,73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3,73(b) to:							
Please char	nge tne corresp	ondence address for the applicat	JON IGENIJIEG III	the attached sections of	T ST CT	· K 3.73(b) io.	
7		sociated with Customer Number:	75671		1		
OR I	ne address ass	ociated with Gustomer Number:					
Firm	or idual Name						
Address	ACUal Name						
City			State			Zip	
Country							
Telephone			Email				
Assignee Name and Address: Kapernelly Assets AG, LLC							
2711 Centerville Rd.							
Wilmington, DE 19808							
		United States	of Amer	ica			
		ogether with a statement un	der 37 CFR 3.	.73(b) (Form PTO/SB/			
		on in which this form is use ointed in this form if the app					
		application in which this Po			Jact on A	Jenan G. a.c.	isaigiics,
	The ind	SIGNA Widual whose signature and title	TURE of Assig	nee of Record ow is authorized to act or	n behalf of	the assignee	
Signature	1/1/14	- Plan			Date 4, 17, 09		
Name	Melissa Coli	tan D topic					
Title	Authorized Person for Kapernelly Assets AG. LLC						

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